



SOFT ACCOUNT APPLICATION

(SIGNATURE ON-FILE TRANSACTION)

TYPE OR LEGIBLY PRINT ALL INFORMATION

CONTRACTOR LICENSE OR 'G' # _____ Licensee's Name _____

CONTRACTOR LICENSE OR 'G' # _____ Licensee's Name _____

CONTRACTOR LICENSE OR 'G' # _____ Licensee's Name _____

CONTRACTOR LICENSE OR 'G' # _____ Licensee's Name _____

Company Name _____ Fed. ID # _____

Company Address _____ E-Mail Address _____

City/State _____ Zip Code _____ Telephone (_____) _____ FAX (_____) _____

APPLICANT

PRINT OR TYPE NAME

SIGNATURE

SSN

DATE

CREDIT CARD ACCOUNT

ACCOUNT NUMBER

EXP. DATE

TYPE

☐ VISA ☐ MC

CARDHOLDER NAME

CARDHOLDER ADDRESS

CITY/STATE/ZIP

CREDIT CARD BILLING ADDRESS

CITY/STATE/ZIP

Only persons listed on this form with signatures attached shall be authorized to sign permit applications for payment processing.

#1 NAME	TITLE	SIGNATURE
#2 NAME	TITLE	SIGNATURE
#3 NAME	TITLE	SIGNATURE
#4 NAME	TITLE	SIGNATURE

SIGNATURE ON FILE TRANSACTION ACCOUNTS EXIST FOR THE CONVENIENCE OF THE ACCOUNT APPLICANT. THE SIGNATURES THAT APPEAR ON THIS APPLICATION SHALL HAVE THE POWER TO CAUSE A DEBIT AGAINST THE BUSINESS ACCOUNT FOR THE PROCESSING OF FEES DUE THE CITY. ALL RISK OF LOSS IS TO BE BORNE BY THE APPLICANT. IN THE EVENT AN AUTHORIZED SIGNATORY BECOMES NO LONGER ASSOCIATED WITH THE BUSINESS AND/OR THE DATE OF THE CREDIT CARD ON FILE BECOMES EXPIRED, IT SHALL BE THE RESPONSIBILITY OF THE APPLICANT TO IMMEDIATELY NOTIFY IN WRITING THE CITY OF COLUMBUS, OFFICE MANAGER OF THE CASHIER'S SECTION OF BUILDING SERVICES DIVISION, 757 CAROLYN AVENUE, COLUMBUS, OHIO 43224

APPLICANT SIGNATURE & POSITION HELD IN COMPANY

Sworn to before me and subscribed in my presence this _____ day of _____, in the year _____

NOTARY PUBLIC SIGNATURE

MY COMMISSION EXPIRES

Notary Seal Here

OFFICE USE ONLY

ACCOUNT # _____

PIN #1 _____ PIN #2 _____ PIN #3 _____ PIN #4 _____